

**COUNTY OF PAGE**  
**DIRECTIONS FOR ZONING PERMIT APPLICATION**

- (1) A zoning application fee is due when this application is returned: \$45.00 for Residential Accessory, \$200.00 for Residential, \$300.00 for Non-Residential and \$1,600.00 for collocating antennas on towers under twenty feet. (IN ADDITION TO ZONING APPROVAL, YOU WILL ALSO NEED A SOIL EROSION PERMIT BEFORE ANY EXCAVATION IS STARTED AND OBTAIN A BUILDING PERMIT BEFORE ANY CONSTRUCTION IS STARTED.)
- (2) Stake and flag the property lines every 200 feet with stakes high enough to be seen. Stake the proposed structure on all corners. *Please stake the property lines as they pass by the proposed structure. The stakes for the property lines should be a different color than the stakes for the proposed structure. This should apply to all lots no matter what size your lot is.*  
  
**NOTE:** If the property lines are not identified and the proposed structure is not staked at the time of the inspection an additional fee will be added for the return trip in the amount of the application fee.
- (3) Attach either a survey plat (if one is available) or a hand drawn sketch of the property. On this plat or sketch draw & identify all existing buildings and the proposed structure.
- (4) Homeowner shall provide a copy of the deed with this application for new homes.
- (5) Please attach a copy of the approved Virginia Department of Transportation (VDOT) entrance permit.
- (6) If the proposed structure size or the proposed structure location **CHANGES** after the zoning permit has been approved, you will need to pay the additional fees and have the new size and/or location re-inspected.
- (7) Tax map no. for question no. 4 of application may be found in the upper left hand corner of your tax receipt for the property. (Tax map no. example: 54-(A)-23)
- (8) Zoning Permits become null & void six (6) months after being approved if the work is not started and can be renewed for one additional six month period.
- (9) All zoning applications will be considered according to the order that they are submitted and fees are paid.
- (10) If you have any questions, please call (540) 743-1324 or (540) 743-6674, 8 a.m to 4 p.m., Monday through Friday.

\* The fee for construction started prior to permits being issued will double the normal fees.

ADDITIONAL INFORMATION MAY BE REQUIRED IF THE ZONING ADMINISTRATOR DETERMINES IT NECESSARY TO ENSURE CONFORMANCE WITH AND TO PROVIDE FOR ENFORCEMENT OF THIS ORDINANCE.

**\*\*\*\*Applications shall have a deed, plat or sketch and shall have specific directions to the property. Also it shall have a VDOT entrance permit approval and property lines shall be staked and flagged before processing this application.**

COUNTY OF PAGE  
ZONING PERMIT APPLICATION

DATE: \_\_\_\_\_

1. The applicant is the owner\_\_\_ other\_\_\_ (Check one)

2. OWNER OCCUPANT (If other than owner)

Name\_\_\_\_\_ Name\_\_\_\_\_

Address\_\_\_\_\_ Address\_\_\_\_\_

Phone #\_\_\_\_\_ Phone #\_\_\_\_\_

3. Location of property (give exact directions)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Tax Map #\_\_\_\_\_

5. Size of Property\_\_\_\_\_

6. Current use of this property\_\_\_\_\_

7. What other structures are on the property? \_\_\_\_\_  
\_\_\_\_\_

8. Proposed Structure\_\_\_\_\_

9. The proposed structure will be put to the following use (example: Residence; storage of hay, storage of a tractor; storage shed; addition of a living room): \_\_\_\_\_

10. Size of buildings (include porches, garages, etc.)

\_\_\_\_\_  
Height of structure \_\_\_\_\_ Feet

11. Has a previous application been made? \_\_\_\_yes \_\_\_\_no

I (we), the undersigned, do hereby certify that the above information is correct and true. I (we) further understand that in granting approval of this application, the Board of Supervisors may require that I (we) comply with certain conditions and that such approval shall not be considered valid until these conditions are met.

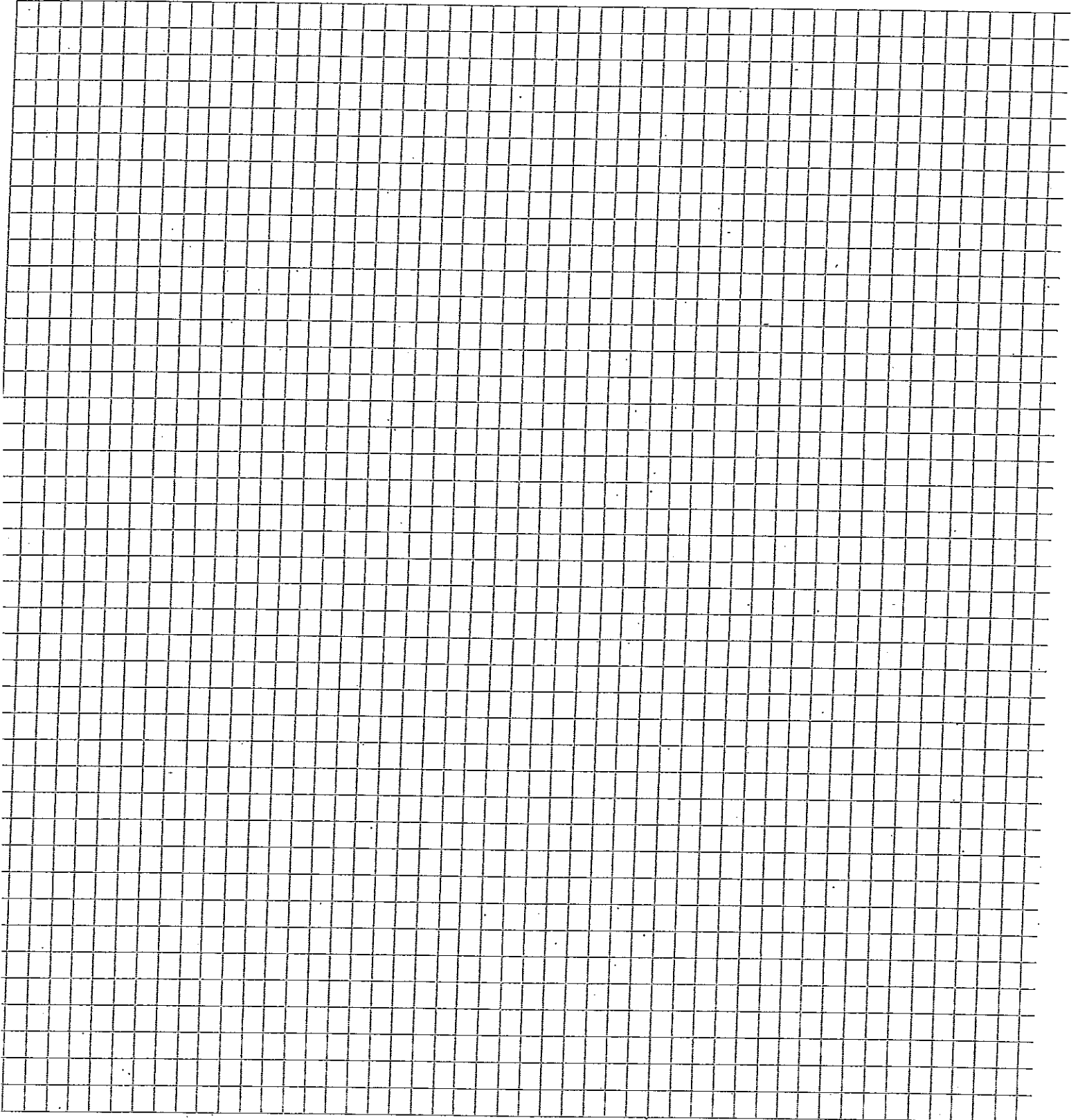
Signature of Owner:\_\_\_\_\_

Signature of Applicant:\_\_\_\_\_

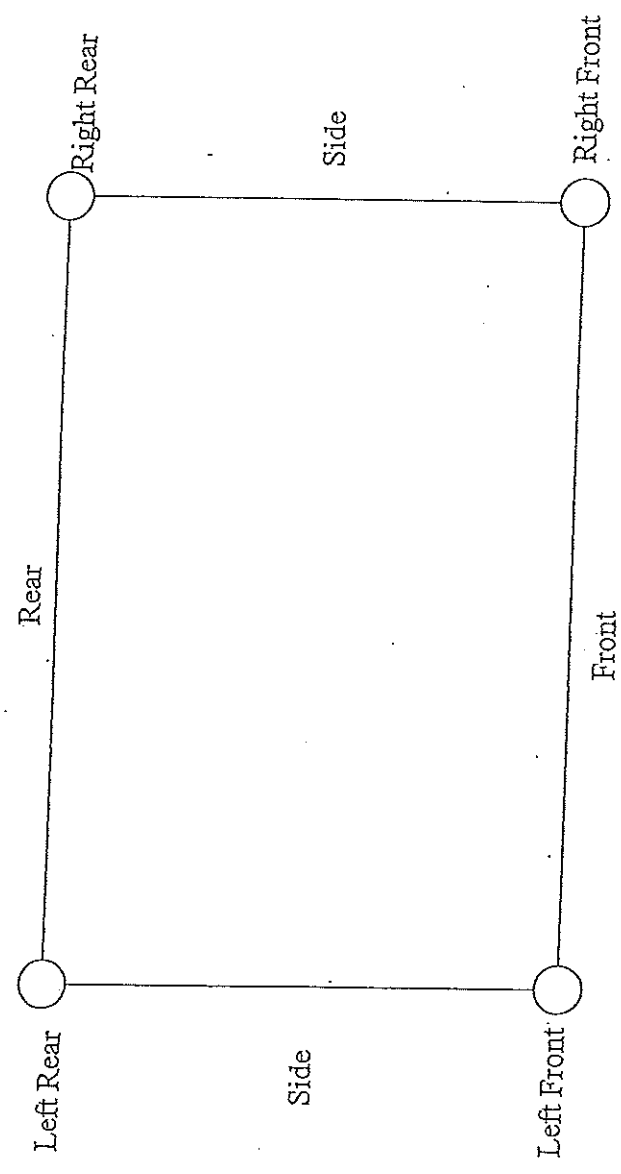
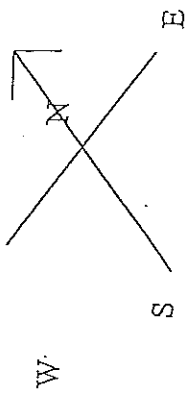
Complete Mailing Address:\_\_\_\_\_

Telephone #\_\_\_\_\_

Draw Site Plan Below or Attach a Copy of the Site Plan to the  
Application



EXAMPLE OF HOW TO STAKE OFF YOUR PROPERTY



Right of Way

Owners Name/ Lot I.D. or Number